

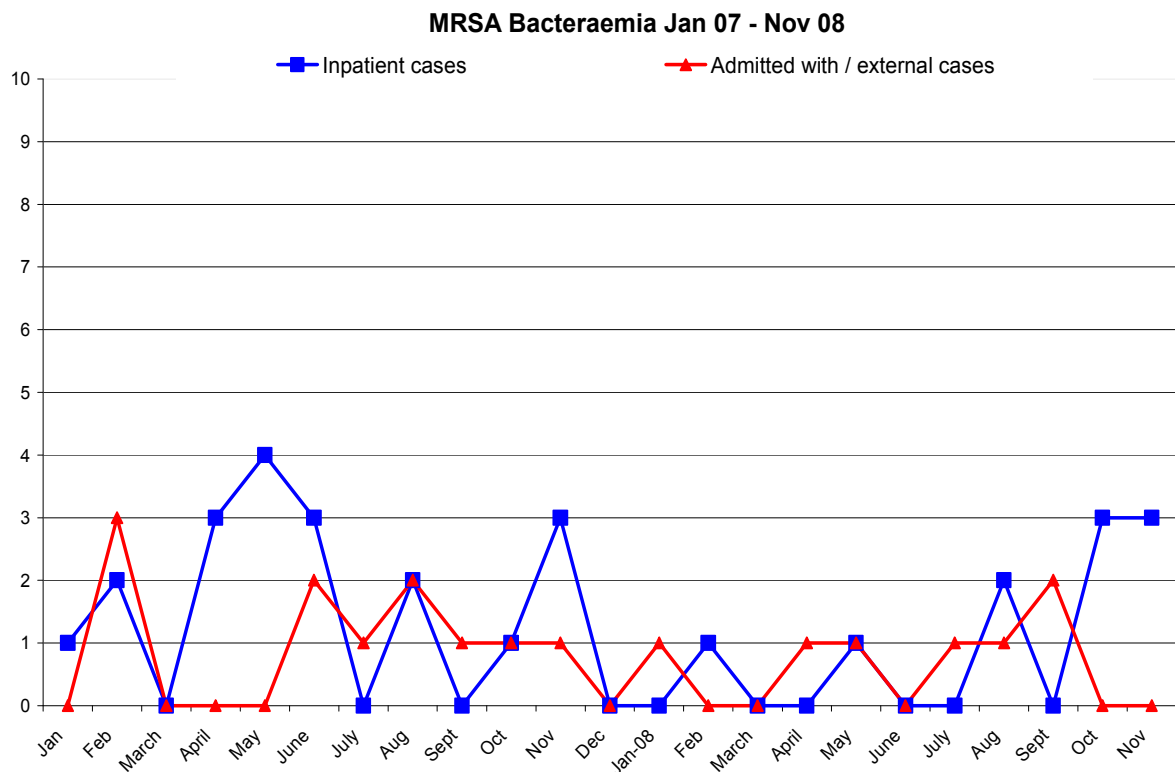
In November 2007 the Trust Board issued a public statement on Infection Prevention and Control to send a clear message to all, that infection prevention and control is a top priority for the organisation.

No patient should acquire an infection in Darent Valley Hospital. We are committed to supporting staff in employing best clinical practice and the highest hygiene standards in order to ensure the protection of all patients. For those patients at particular risk of infection as a result of their underlying condition or with pre-existing infection, clinical staff should take every measure to treat appropriately to minimise the risk of infection developing or spreading.

We believe that by effectively involving patients and the public in this agenda, we can raise awareness of how everyone can contribute to their own and others' safety and well-being.

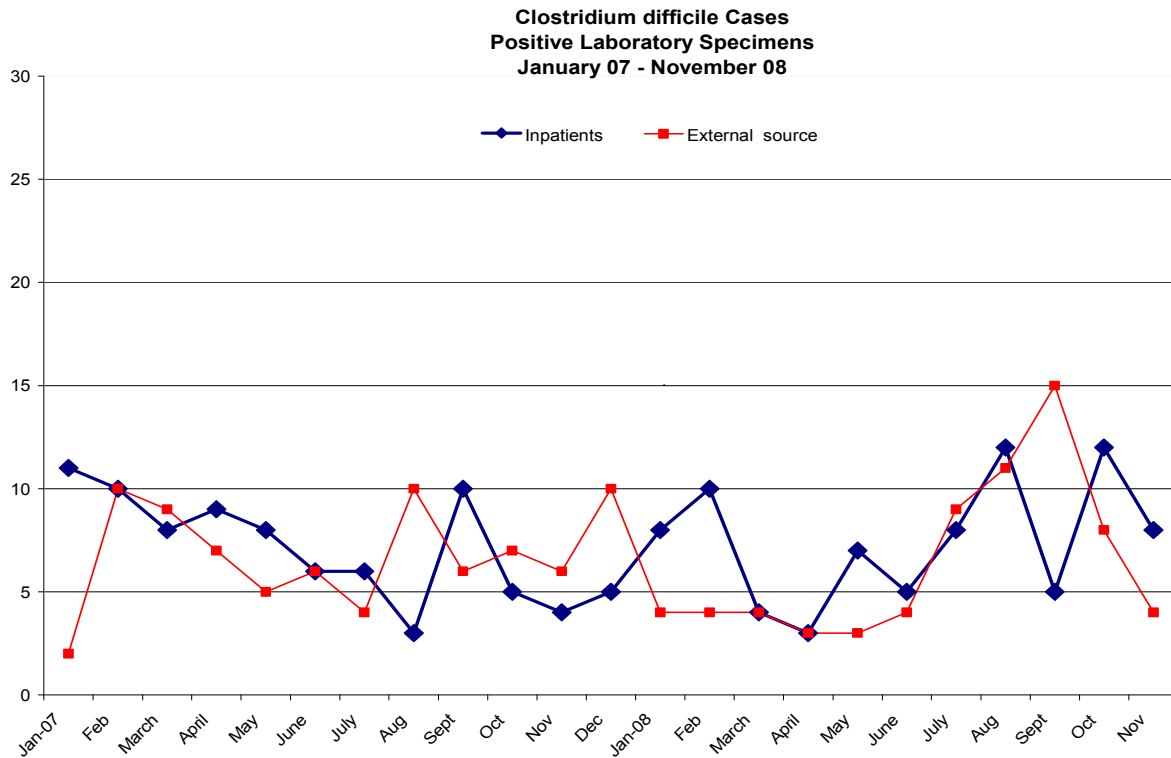
Rates of HAI

MRSA



MRSA target for all cases 08/09 = 12, currently 2 above target Hospital acquired bacteraemias account for 9 of the 14 cases. Root cause analysis of all cases has identified chronic lower limb wounds as the predominant source of recent infections.

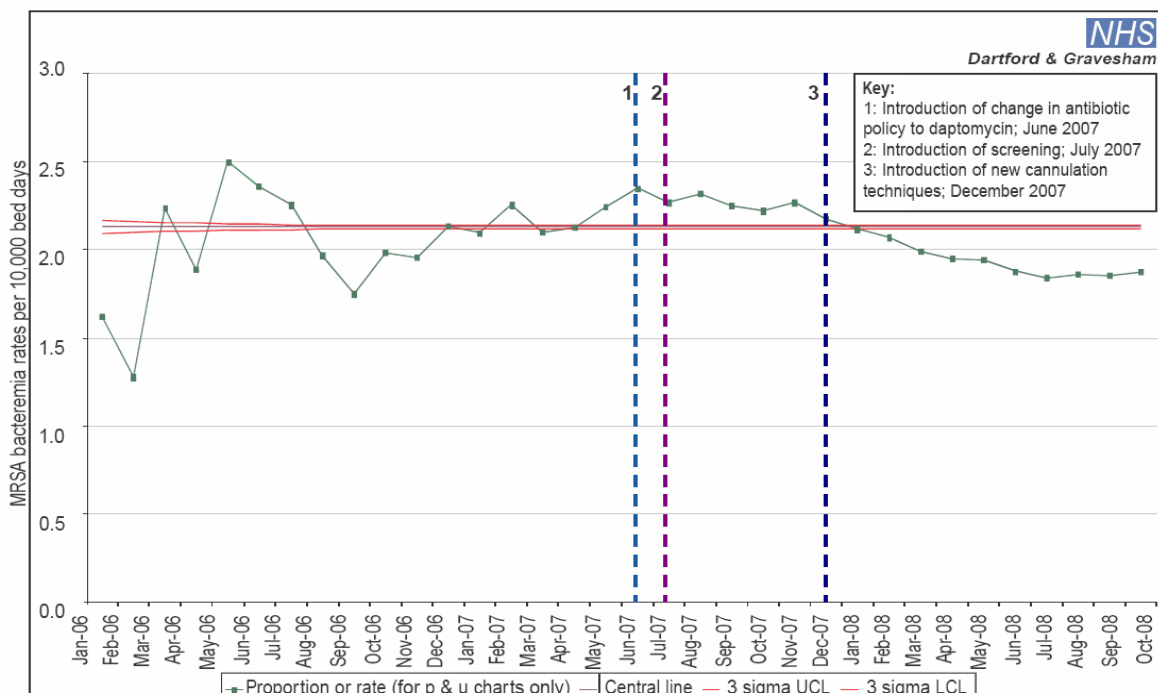
C. diff



C. diff Hospital acquired limit for 08/09 = 84, currently 63

Changes in practice

The most significant change was a review in IV cannula insertion and management at the end of 07. Where IV cannulae had been associated with a significant proportion of MRSA bacteraemias there has only been 1 cannula related bacteraemia since Nov 07.



In addition the appointment of 2 additional Infection Control Nurses has allowed greater input in the clinical areas, audit of practice and education. The Tissue Viability Nurse is now also managed by the DIPC as infection control has an integral part in reducing the risk of infection in wounds.

Successes & challenges

The success of the IV management pathway has been extended to urinary catheters as they are recognised as being a source of HAI. 'Bare below the elbows' uniform policy has been widely adopted by clinical staff thereby facilitating hand hygiene practice. Infection control education has been extended to all medical and nursing students attending the Trust.

Infection control scored 6/7 in the Healthcare Commission Annual Ratings report contributing to an excellent rating for quality of care.

The HCC unannounced inspection in August 08 identified 2 sub duty breaches of the Hygiene code (dust on Patientline equipment and no policy document for environmental management). Both issues have now been rectified.

Challenges – The long length of stay of some patients present risks and we are closely monitoring this issue.

Assurance framework

In addition to the reporting structure (Appendix 1) the DIPC provides the CEO with a monthly performance report on MRSA, C. diff and audits of Infection Control Practice in clinical areas. An additional 5 audit topics are being added in January with the frequency being increased to weekly. From January 09 all audits will be undertaken by the Matrons.

Infection control audits

No	Performance indicator	Target 2008	Frequency	01	02	03	04	05	06	07	08	09	10	11	12	RAG Rating
1	Hand hygiene/ dress code	100 %	Monthly	81	91	98	98	98	97	99	99	96	99	99		Green
2	Risk Assessment	100 %	Monthly					71	76	82	90	85	85	86		Orange
3	MRSA Admission Screen	100 %	Monthly	51	76	87	98	93	88	93	93	92	90	86		Orange
4	Peripheral cannula	100 %	Monthly	61	75	79	88	98	99	97	94	98	90	93		Green
5	Commodes	100 %	Monthly							81	85	84	92	96		Green

(RAG rating of green reflects three month rolling average performance above 90%)

Staff and Patient Involvement

Staff across the Trust at all levels are fully involved and committed to infection control as a key element in providing a safe environment for patients. The ranges of patient information leaflets have been expanded and together with a short video highlighting infection control are available on the Trust web site. A large display stand has been erected in the main hospital street where information on MRSA, C diff rates and patient leaflets are also provided. Leaflets are also made available on all wards.

Hand gel dispensers and 'clean your hands' signage is widely distributed.

Iris Smith
Director of Infection Prevention and Control
Dartford and Gravesham NHS Trust

Trust Infection Prevention & Control Structure & Reporting

Trust Board



Clinical Governance Committee



Infection Control Committee (Quarterly Meetings)

Medical Director (Chair)
 Director of Infection Prevention and Control
 Consultant Microbiologist Associate Specialist in Microbiology
 Senior Nurse Infection Control
 Consultant Physician Consultant Surgeon Director of Nursing
 Assistant Director of Governance Sterile Services Manager Carillion Services Manager
 Occupational Health Physician/Nurse Health Protection Unit Representative



Infection Control Team

Director of Infection Prevention and Control
 Consultant Microbiologist Associate Specialist in Microbiology
 Matron In Infection Control Senior Nurse Infection Control

Senior Leads in Infection Control

Matron Surgical Specialities	Matron Medicine
Matron Elderly Medicine	Matron Emergency Medicine
Matron Day Care Unit	Matron Critical Care
Matron Critical Care Outreach Team	Manager Paediatric Services
Manager Theatre Services	Manager Physiotherapy Services
Manager Radiology Services	Manager Midwifery Services
Bed Bureau Manager	



Infection Control Link Staff

All wards & departments have a nominated member of staff with specific responsibility for infection control in their area